...are required to respond to a collection of information unless it displays a valid OMB control number. U.S. DEPARTMENT OF COMMERCE

PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-875

Application or Docket Number: 10/772,086

APPLICATION AS FILED – PART I

FOR	(Column 1) NUMBER FILED	(Column 2) NUMBER EXTRA	SMALL ENTITY RATE ($)	SMALL ENTITY FEE ($)	OR	OTHER THAN SMALL ENTITY RATE ($)	OTHER THAN SMALL ENTITY FEE ($)
BIC FEE (CFR 1.16(a), (b), or (c))							
ARCH FEE (CFR 1.16(k), (l), or (m))							
UMINATION FEE (CFR 1.16(o), (p), or (q))							
AL CLAIMS (CFR 1.16(i))	minus 20 =						
EPENDENT CLAIMS (CFR 1.16(h))	minus 3 =						
.ICATION SIZE (FR 1.16(s))	If the specification and drawings exceed 100 sheets of paper, the application size fee due is $250 ($125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).						
IPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))							
			TOTAL			TOTAL	

difference in column 1 is less than zero, enter "0" in column 2.

APPLICATION AS AMENDED – PART II

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE ($)	SMALL ENTITY ADDITIONAL FEE ($)	OR	OTHER THAN SMALL ENTITY RATE ($)	OTHER THAN SMALL ENTITY ADDITIONAL FEE ($)
Total (CFR 1.16(i))	* 11	Minus	** 20	= 7	x 25 =		OR	x 50 =	
ependent (CFR 1.16(h))	* 3	Minus	*** 3	= 2	x 100 =		OR	x 200 =	
plication Size Fee (37 CFR 1.16(s))									
RST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									
					TOTAL ADD'L FEE	180	OR	TOTAL ADD'L FEE	360

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE ($)	ADDITIONAL FEE ($)	OR	RATE ($)	ADDITIONAL FEE ($)
otal (1.16(i))	*	Minus	**	=	X =		OR	X =	
ndent (1.16(h))	*	Minus	***	=	X =		OR	X =	
ation Size Fee (37 CFR 1.16(s))									
PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(j))									
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

ntry in column 1 is less than the entry in column 2, write "0" in column 3.
Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
ighest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
hest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the ess) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, ng, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments [illegible] Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ID TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.